



September 2008

Master of Laws in Health Law University of Washington

Introduction

The University of Washington (UW) seeks approval to establish a Master of Laws (LL.M.) in Health Law degree program at its Seattle campus. Housed within the School of Law's Center for Law in Science and Global Health, this self-sustaining program would differ from the Law School's existing health law track for (Juris Doctor) J.D. students in terms of target audience and depth of health-specific content. It would enroll 17 FTE students in fall 2009 and would achieve full enrollment of 30 FTE by 2013. At full enrollment, it would graduate 30 students per year, who would be prepared for specialty legal practice and careers in the public and private sectors.

Relationship to Institutional Role and Mission and the Strategic Master Plan for Higher Education in Washington

According to the "UW Role and Mission Statement," UW's primary mission is the preservation, advancement, and dissemination of knowledge. The proposed program would support UW's role and mission by disseminating knowledge regarding the rule and role of law in molding health care systems, fostering civil society, promoting social justice and furthering individual, population, and global health.

In addition, the proposed program would support the *Strategic Master Plan for Higher Education* by expanding access to postsecondary degrees in a field, which facilitates greater economic prosperity, innovation, and opportunity. Health law exercises a significant impact because it controls how medical, scientific, and health technology innovations are diffused through population groups.

Diversity

To ensure diversity in the program, planners would:

- Market through minority bar and professional associations;

- Work in collaboration with the Law School's Asian and Comparative Law Program and Native American Law Center to identify additional marketing targets and potential students of diverse backgrounds;
- Advertise through list-serves and internet sites to reach students of diverse racial ethnic and cultural backgrounds;
- Subject to availability, use program revenue to further diversity goals;
- Take steps to fill faculty positions, as they become available, with an eye to further increasing faculty diversity;
- Seek input from program graduates on how to improve diversity recruitment; and
- Employ alumni as student ambassadors to assist recruiting efforts.

Program Need

The proposed program would respond to the needs of students, employers, and community stakeholders and would not unnecessarily duplicate existing programs in the state.

As evidence of student need, program planners note that 28 out of 181 entering J.D. students in the class of 2007 identified themselves as health law students, an increase of more than 500 percent since 2001. In addition, the School of Law's Gates Public Service Law Scholars program reports about 30 percent of its applicants and awardees have an interest in health and global health. Furthermore, other law schools have reported growing numbers of law students with educational or work experience in health sciences, medical, and biotechnology areas.

As evidence of employer need, program planners cite the Department of Labor's Occupational Outlook Handbook (2008-09), which states that "employment of lawyers is expected to grow 11 percent during the 2006-16 decade, about as fast as the average for all occupations . . . Job growth among lawyers also will result from increasing demand for legal services in such areas as health care, intellectual property . . . and environmental law." The Occupational Outlook Handbook also notes that, because of the high competition for jobs, "employers increasingly seek graduates who have advanced law degrees and experience in a specialty." This is consistent with the HECB State and Regional Needs Assessment's statement that "Employers consistently demonstrate a preference for better educated workers.

Further evidence of employer need comes from a survey done by the National Law Journal in 1999¹. In that survey, several large law firms reported that the number of attorneys involved in full-time health law practice increased dramatically during the 1990s. For example, in 1993 only 24 attorneys at Foley and Lardner devoted their practice to health law. By 1999, that number had grown to 155. Similarly, at McDermott, Will and Emery, the number increased from 90 to 150. Virtually, all of the large firms reported increases exceeding 100 percent during this six-year time frame.

As evidence of community need, program planners note the Law School has a vigorous Student Health Law Organization engaged in public service activities. Many of its members work with

¹ Program planners indicated that they did an exhaustive search and could not find more recent statistics.

legal advocacy organizations, patient and immigrants rights organizations, and child advocacy organizations. LL.M. students would bring additional talents and skills to these activities and serve in peer mentorship roles with J.D. student members. On a broader scale, the community would benefit from program graduates prepared to address compelling issues that face our society, such as the tension between patient rights and limited health care resources; litigation related to health care services; risks vs. benefits of innovative genetic and biotechnologies; ethical and legal issues arising at the beginning and end of life; and the challenges of achieving improved global health.

Currently, there are only 14 American Bar Association accredited law schools in the United States offering a LL.M. degree program in Health Law. Only one of these, Arizona State University, is located in the Western United States. Thus, the proposed program would not unnecessarily duplicate existing programs.

Program Description

The proposed program aims to provide students with a multidisciplinary opportunity to engage in advanced study of health law and prepare for diverse career opportunities. The target audience would consist mainly of three groups: lawyers who have recently obtained a J.D. degree and have an interest in health law specialty training and education; lawyers who have been practicing for some time and are interested in retraining to build health law expertise; and international lawyers seeking a United States credential with a specialty in health law.

To be admitted, students must hold a J.D. or equivalent degree², submit official transcripts, submit three recent letters of recommendation, demonstrate a progression between past and present career experience, and submit a 2-3 page statement of purpose. Students must be able to articulate their rationale for seeking an LL.M. in Health Law.

Once admitted, students would take 36 credits, including 12 credits worth of required core courses. In addition, students would be required to participate in a seminar course with a major research and writing project (4-6 credits). Students would use elective credits to fit their educational goals by pursuing one of the following three tracks within the proposed program: U.S. Health Law and Policy; Global Health and Justice; or Genomics and Biotechnology. Students would be able to choose electives from within or outside the Law School, including courses in the following areas: public affairs; health services; pharmacy; public health genetics; and medical history and ethics.

Initially, the proposed program would consist entirely of existing courses taught by existing faculty and 85-90 percent of the courses would be taught by full-time tenured or tenure-track faculty. As the program grows, it may be necessary to add a dedicated seminar, and program planners hope ultimately to hire two additional faculty – one of whom would dedicate half of his or her effort to serving as Executive Academic Director.

² International students must have a first degree in law or demonstrate equivalent qualification through work experience.

Students would normally complete the program in one year (full-time) or in two years (part-time) and would achieve the following learning outcomes:

- Obtain and/or regain foundational knowledge in health law, health care systems and their legal infrastructure, liability in the health care industry, and the role of law in fostering an ethical and just approach to individual and population health;
- Develop understanding of the role of law in navigating the chasm between individual rights and public/global health needs;
- Understand the pivotal role of regulatory and intellectual property law in development of new medical technologies, products, and services and the impact this has upon access and cost in health care systems;
- Know the social determinants of health and the ways that local, state, federal, tribal, and international law may be used to address disparities and foster equitable individual, population, and global health;
- Analyze legal issues from a multidisciplinary perspective through opportunities to work with faculty and students from other disciplines; and
- Develop enhanced research capacity to analyze health law controversies and posit solutions.

These student-learning outcomes would be measured using a variety of assessment tools, including written examinations, writing projects, and oral examinations. In addition to traditional course work, there would be opportunities in the curriculum for capstone-like independent projects, legal and multidisciplinary research projects, oral individual and group presentations, and problem-based learning exercises. Students would be assessed within their individual courses, based on learning outcomes identified for those courses. Learning outcomes for each course have been clearly defined and aligned with the program-level learning outcomes stated above.

The proposed program would employ multiple program assessment approaches, including:

- Quarterly student course evaluations supplemented by targeted detailed evaluations;
- Peer review of teaching and curricular offerings;
- Internal advisory board, including faculty from the proposed program and from collaborating schools and departments throughout the university;
- External advisory board, including industry leaders and legal practitioners;
- Entry interviews to determine student expectations and goals;
- Exit interviews, with a follow-up evaluation a year after program completion. The data collected would be reviewed by the internal advisory board during its annual program evaluation meeting;
- Input from the Student Health Law Organization, which would function as a focus group;
- Regular surveys of current students and alumni; and
- Input from employers and the Washington State Society of Healthcare Attorneys.

Data from all of the above approaches would be used to assess and revise content and curriculum of the proposed program as needed.

Program Costs

The proposed program would enroll 17 FTE students in the first year, growing to full enrollment of 30 FTE students by the fifth year. To implement the program, its planners have budgeted 1.5-2.0 FTE for administrative staff and 0.2 FTE for faculty during the first year and 2.0-2.5 FTE for administrative staff and 2.2 FTE for faculty at full enrollment. The program would be self-sustaining, funded completely by student tuition and fees. Tuition would initially be \$800 per credit, which falls within the range of tuition amounts charged by other institutions for health law LL.M. programs³.

At full enrollment of 30 student FTE, the total (direct plus indirect) cost of instruction would be \$771,586, or \$25,719 per FTE. In comparison, according to the HECB's *2005-06 Education Cost Study (July 2007)*, the total cost of instruction per average annual law student FTE is \$24,980. At full enrollment, the program anticipates a revenue surplus of \$92,414 per year, which is not included in the cost per FTE analysis above. Depending on the amount of the surplus and program needs, program planners intend to spend revenue surpluses on existing and new faculty salaries, minority recruitment, student scholarships, and research assistantships.

External Review

Two reviewers reviewed the proposal: Mark Rothstein, Herbert F. Boehl Chair of Law and Medicine and Director, Institute for Bioethics, Health Policy and Law, University of Louisville; and Barry Furrow, Professor of Law and Director, Health Law Program, Drexel University Earle Mack School of Law. In addition, Dr. Dennis Murphy, Provost and Vice President for Academic Affairs, Western Washington University, submitted a comment letter supporting the proposed program and noting that it will fill a void in the region.

Both reviewers strongly endorsed the proposed program, remarking on the strength of its faculty and quality of its curriculum.

Reviewer Rothstein noted that the health law faculty consists of first rate teachers and scholars, who have the administrative expertise to make the program work. Rothstein indicated the proposal did a thorough job of evaluating other LL.M. program curricula and replicating their best aspects into a comprehensive curriculum for UW. His chief concerns were that the class size would be too big to permit good faculty-student interaction without burdening the faculty and the program should contain a thesis requirement. With regard to the first concern, program planners responded that the existing faculty-student ratio was low enough to provide sufficient cushion; however, if the faculty-student interaction became burdensome, some program revenue would be used to add part-time faculty or buy existing faculty out of other responsibilities. With regard to the second concern, program planners responded that although there is no thesis requirement, there is a substantial writing requirement, the goal of which is a research paper of

³ Six out of fourteen institutions charge more than \$800 per quarter credit equivalent and eight charge less. At \$800 per credit, students would pay \$28,800 to complete the program.

publishable quality. This requirement is substantially the same as in other LL.M. programs throughout the country.

Reviewer Furrow noted that UW's existing programs provide a very strong foundation for adding this LL.M. degree and that the beauty of the proposed program is that it links to a variety of other units and benefits greatly from such a linkage. He saw "no reason why this program shouldn't be the West Coast anchor for graduate legal education in health law," as program planners believe it will be. He had only minor budgetary concerns, which program planners responded to adequately.

Staff Analysis

The proposed program would support UW's mission and the *Strategic Master Plan for Higher Education*. It would also employ multiple strategies to enhance diversity.

Program planners provided sufficient evidence of student, employer, and community need for the proposed program. Increasing enrollments in the existing J.D. health law track suggest student demand. In addition, students would benefit from having an opportunity to pursue the degree on the West Coast. Furthermore, the Occupational Outlook Handbook and a National Law Journal employer survey suggest employer demand. Finally, the program's students would serve community needs, both during the program and after graduation.

Students would be taught primarily by full-time tenured or tenure-track faculty, whose strengths were noted by both reviewers. In addition, students would study a curriculum whose quality was noted by both reviewers and which, according to one reviewer, replicates the best aspects of other curricula nationwide into a comprehensive curriculum for UW. Students would be assessed in a variety of ways that would include a major research paper. Program assessment would employ multiple measures as well.

The proposed program would build on existing law school and university strengths, and its three tracks would differentiate the proposed program from other programs nationwide. It would be offered at a reasonable cost relative to what those programs charge.

Staff Recommendation

After careful review of the proposal and supporting materials, staff recommends approval of the Master of Laws in Health Law at the University of Washington. The HECB's Education Committee discussed the proposal during its September 8, 2008 meeting and recommended approval by the full board.

RESOLUTION 08-28

WHEREAS, The University of Washington proposes to offer a Master of Laws in Health Law;
and

WHEREAS, The program would build on existing law school and university strengths, and its
three tracks would differentiate it from other programs nationwide; and

WHEREAS, The program would respond to student, employer and community need and would
provide students with their first opportunity to pursue this kind of degree on the West Coast;
and

WHEREAS, The program's students would study a high quality curriculum taught by
experienced faculty; and

WHEREAS, The program has strong support from external reviewers; and

WHEREAS, The program would not be unnecessarily duplicative of existing programs;

THEREFORE, BE IT RESOLVED, that the Higher Education Coordinating Board approves the
Master of Laws in Health Law at the University of Washington effective September 18, 2008.

Adopted:

September 18, 2008

Attest:

Bill Grinstein, Chair

Roberta Greene, Secretary